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INTRODUCTORY LECTURE

TO COURSE AT

HAHNEMANN COLLEGE, PHILADELPHIA, 1867-8.

BY CONSTANTINE HERING, M. D.,

Prof. of Materia Medica and Institutes of Medicine.

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INTRODUCTORY

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There was an old retired statesman in Holland, a man of standing, who in the year 1831 wrote a small but replete work containing a sketch of all the most important events, characterising the last sixty years of his life. Beginning 1770, six years before the new era in history, he pictured what had happened in the world since that time, from the Declaration of Independence to the French Revolution, the conquering of Europe, the German wars against Napoleon, the Battle of Waterloo, fought very near his home, up to Napoleon's death on the Island of St. Helena.

The author did not forget the principal power, the inward moving force, the *sciences and arts*.

Speaking of *medicine* he showed how in that also one revolution followed the other, and one new system the other. He mentioned *John Brown*, who, like a rocket, shot up among the clouds, bursting and sending fire balls, spreading a brilliant light in the dark night of medicine, to be followed by a greater darkness. Broussais, with his French centralisation, "all diseases are gastritis," and "the universal remedy leeches;" *Rasori*, the Italian, an altered Brown, proposing "contra stimulus," and giving the most overwhelming doses. Finally, our author speaks of *the Organon of Hahnemann*. As he was more or less opposed to all revolutions, conservative in the extreme, he objects to this too, but still allows, "at first sight this system seems to be very acceptable," "but as there are so many different diseases and thus a great many different drugs required, *where will Hahnemann ever find so many healthy men, willing to submit to being made sick, merely from love of their fellow-men?*"

How can you expect, he says, to find men willing to make themselves sick, in order to be able to heal the sick?

That was his principal doubt, and it was a more cutting objection than all others thrown against Hahnemann, but, it did not do any harm. At the time he was writing this, only twenty years after Hahnemann published the first edition of his *Organon*, six volumes of his *Materia Medica* had been published already, and four volumes of his *Anti-psorics*. Two volumes had been published by Hartlaub, and twenty-seven numbers of the *Archives* had given, in each number, a new proved drug.

The next objection to Hahnemann's *Materia Medica* had not much more sense or weight: "The healthy and the sick are entirely and altogether different." "Effects of drugs on the healthy are of no

use and cannot be applied to the sick." This is an absurdity throughout. The differences between the most healthy and the sickest are gradual ones, therefore, a sharp line of division can nowhere be drawn.

As soon as a healthy man is proving, he gets sick, and thus he belongs in so far to the sick. Why should we not have a right to compare the one suffering, from a drug, with another suffering from miasma or other influences?

A third grand objection was made, a monstrous one,—a real monster of an objection:

"Come out ye Homœopathic men," they said, "and make a true intermittent, make a scarlet fever, make a real disease, and we will come with our diagnostic instruments and examine." They supposed, of course, we did not understand their pathology, and were not able to make a diagnostic investigation. Of course it would be an easy thing to show, in each such case, if we would offer them as such, that they were not real intermittent, nor real scarlet fevers, etc. Strange infatuation! we do not need their pathology, nor their instruments to obtain exactly objective characteristic diagnostics. We can do this ourselves, *just as well as they*. Why should we not have been able to learn what *they* have learned? But the greatest absurdity in their objection lies herein: we have never pretended to make such diseases, we never did pretend to make diseases. Did we ever say we could make the plague, as the witches did in the middle ages? Did we ever say we could make an epidemic Cholera Asiatica, as the stupid peasants in Russia believed, and in Italy still believe? All that we ever pretended to find out and get by our provings was: a number of symptoms, resembling cases of sick men, not of diseases. Even Hahnemann in his first experiment did not say Cinchona powder had produced an intermittent fever. He very wisely said, it made such symptoms as I had been subject to before, when I suffered with the intermittent.

A fourth objection has been made and has been repeated by a great number, has been echoed all over the land, has been such a powerful and persuasive one, that we hear it even in our midst, from our own friends up to this day. Our *Materia Medica* contains a great many symptoms, and a great many of them are uncertain, a great many even very doubtful, some decidedly false. Thus our *Materia Medica* is not pure, and it must be purified.

This "*uncertainty of symptoms*," so much complained of, is not a thing we pretend to oppose; this objection is not only allowed to them, but it is even granted that every single symptom of each prover may not be from the drug, but from something else. We do not think, do not dream of opposing it at all, we give up to it altogether and entirely. It was considered not worth while on our side to talk much about it, why should we? Are not all human undertakings liable to error? Why did Hahnemann so often and emphatically recommend the greatest care in proving? He knew as well as any one of us, that observations are very often deceiving, even a master-mind may

be deceived, and may make an erroneous observation. Did not Hippocrates, 2,300 years ago, state in the first of his famous aphorisms : "Life is short, our art is long, the chances are transient; trials very slippery, and judgment a difficult thing."

Thus allowing all these objections, regarding the uncertainty, as based on a self-evident truth; they may be raised by all our opponents and repeated in our midst, but they all fall down to the ground, like the above first objection of the old retired Hollander, for we are a great many years ahead of them, as we have a way to ascertain what is true. This very cry of uncertainty or impurity was raised further and particularly against symptoms quoted, taken out of old reports, books, etc.; neither Hahnemann nor any one of us laid much weight on any of them. We can do without them; let them all be stricken out, we do not care. The opponents in our midst dwell upon symptoms *observed on the sick* and call them *impure*; they roll their eyes, like hypocrites, saying, Hahnemann used the word *M. M. Pura*, and he had no right to do it; a single symptom taken from a sick man made all the rest impure. He used this word as it has been used by all philosophers and scientific men, meaning, *free from guessing*, but they use it now as the washerwomen use the word "clean."

The more our *Materia Medica* became enlarged by observations, and the greater the difficulty in studying it, the more popular the ery became for purifying it; and the more physicians were driven over to our side, the more enemies we had in our own camp.

What is to be said about these objections? Regarding the uncertainty of the symptoms obtained by provers, it is true; further, symptoms observed in sick persons are very uncertain, that is also true; further, symptoms taken out of old mouldy books, are still more doubtful, that is true; in fact, all the objections raised against the collection called *Materia Medica* are true, every one of them. But what possesses our opponents and all their imitators within our own ranks, to imagine, that they tell us something new by making such objections? How self-conceited they must be, to come out thus, like wiseacres, supposing we had not known all this long ago. Of course we did. It is a self-evident truth, that particularly in such experiments with drugs on the healthy, and still more on the sick, the symptoms may or may not be caused by the drug. Only the most shocking impudence, and as is usually the case, ignorance combined with it, could pretend to teach us, to correct us, to reprimand us, as if we were school-boys. It is not at all in these objections that we differ from them. All the *conclusions* drawn by our opponents and by all their imitators within our own ranks: *all their conclusions* are wrong, essentially and entirely wrong, are against all sound logic, against all principles of the strict method to build up a real, a natural science, by careful induction. We do not care much about all their opposition, original or copied, because we are all the time engaged in healing the sick, and that is the very way, nay, the *only* way of continually perfecting our *Materia Medica*. While we are collecting facts upon facts, *bona fide*, according to the best of our abilities, analytically, in order to abstract what is common

to them; while we are collecting one cure after another and trying to find out, how far they correspond with the symptoms—a difficult, a tedious, a toilsome task, but one that brings its reward—our opponents creep into the core, into the midst, and object synthetically, arbitrarily, without any real reason, against all the rules of sound thinking, and ask a number of hypocritical and hypercritical questions: Who was the prover? Was he really healthy? Who reported the proving? Was he able to report? Were his reports in the strict scientific form? And arbitrarily they say: All symptoms observed on *the sick* are good for nothing, etc. Striking in this way, as it were, at the roots, the symptoms fall by the hundred, and by the thousand. One of the most impudent and most illogical, objected, for instance, to all symptoms of Nenning, a late Surgeon in Bohemia, and with one stroke he cut them all off, boasting and crowing like a rooster on his own dunghill, that 11,447 symptoms were all to be stricken out. Hundreds of most striking cures have been made, before and since, simply by the use of symptoms of the same Nenning. But, because the great critic was not able to make such cures himself, he follows in the footsteps of our opponents in the old school, and doubts them, and because he doubts them, he denies them, and because *he* denies them, of course they cannot be worth anything.

What is our way now to certainty? How do we find out what is true, what is trustworthy and what is not?

To give you an idea in a few words, of our way to certainty, our manner of sifting the results of our provings, it is the following:

1. Some symptoms are more decided, and of course require more attention.

2. If we repeat our proving and get the same symptoms; still more.

3. If others prove the same drug and get the same or corresponding symptoms, harmonizing with each other physiologically or pathologically, we consider this a further corroboration.

4. By comparative study of the symptoms of the same drug, we find out what agrees, and what does not, and use Physiology and Pathology as much as we can.

4. We finally give a drug in cases where it seems to be indicated, according to our law, and make *successful cures*, these corroborate some of them still more. Some symptoms become consequently more prominent, some are very often useful, others less often.

6. Some of the sick while we are treating them will get new symptoms, soon after the administration of a drug, if such symptoms disappear a while after, and if they agree with the others from healthy persons, such symptoms may likewise be used and likewise be corroborated afterwards by cures.

7. In this way we obtain our much talked of

CHARACTERISTICS.

This is our way to certainty, and all objections disappear and vanish before them.

These characteristics are to be regarded as settlements in the primeval forests, after a while they become villages, then large towns.

The question has often been raised, what do we mean by characteristics? What are they? Characteristics are symptoms, or only parts of symptom or groups of several symptoms, together representing the character of a drug, or the character of its effects.

What is character?

Applied to the effects of drugs we mean by character the whole of such peculiarities as distinguish this drug from all others. Originally the word character meant the stamp of coins, the mark, the sign of worth. Such drugs as we do not know enough about, we say, have no decided character. Such as we have been giving often and repeatedly, and with a sure success, we say have a character. The single symptoms, or parts of them, we call characteristics.

It is an error to suppose a characteristic to be such a symptom as any respective drug has alone; this may be the case, but even the most decided and true symptom of a drug may be a *unicum*, and not be characteristic. It never becomes a characteristic, because it is a *unicum*. We do not know all symptoms of our best proved and most given drugs, and we know very little, or nothing at all, of an endless number of others. Thus a symptom being known of *one drug* only, our attention may be called to this drug, if we meet the symptom in practice, but such a symptom is not a characteristic until cures corroborate it, and if this is the case, we certainly will obtain other symptoms combined with it.

It is true, we have some very remarkable characteristics, corroborated again and again, symptoms standing alone, as *unica*.

To illustrate by example, when Schreter, one of the provers *most objected* to by the purificators, next to Nenning, proved Borax on himself and also collected symptoms observed in sick children, as being new and corresponding to the other symptoms of Borax, he published the following:

No. 4. Very anxious when riding quickly down hill, it is as if it would take his breath away, which was never the case before. (This symptom continued during the first five weeks.)

5. The child, when dancing it up and down, is afraid; when rocking it in the arms, it makes an anxious face during the motion *downward*. (Observed the first three weeks.)

These two observations strengthen each other. Hence, lecturing on Borax in Allentown, in 1835, the attention of the students was called to this fact. There was nothing like it in our whole *Materia Medica*. *Coffea tosta* produced once a similar symptom. After it had been taken in a strong dose, extract of a pound, the slightest motion of the hammock seemed an enormous one. The perception of passive motion was a magnifying one. *Carbo vegetabilis* has since been added by Boenninghausen: symptoms increasing by sitting on a swing. *Carbo* has vertigo from the slightest motion, also hiccough and nausea, and thus differs from borax considerably.

This one symptom of Borax has been the source of an infinite number of cures in this country. (In Hartmann's *Therapeutics* and Ruckert's collection of cases it is not mentioned as having been used once. See Dr. Martin's case in our *Journal*.)

Another famous *unicum* was the aggravation of symptoms by shaving, in *Carbo animalis*, observed by Dr. Adams of Petersburg; this was generalized by Boenninghausen, and in the preface of his Repertory he mentions a remarkable case. Others will appear in our journals. But also this *unicum* no longer stands entirely alone. *Pulsatilla* has the same peculiarity, and others may follow.

A famous much talked of symptom is the fanlike motion of the wings of the nose in *Lycopodium*. This one symptom has a literature, such quarrels arose about it. It should never be forgotten that the real symptom of *Lycopodium* is not a fanlike but a spasmodic motion of the nostrils, and it corresponds with a dozen of others of this drug, as we will see in the lectures. If the other symptoms of the case do not correspond with *Lycopodium*, and it is given according to this one single symptom, it will either not make a cure of the case, or the cure will be merely an accidental one. It also no longer stands as a *unicum*, since Gross ascertained, in asthma, *Ferrum* has the same as a characteristic. And how could it? The fanlike motion is a symptom in all diseases with difficult breathing, and we cannot expect to cure all by *Lycopodium*.

In short, a symptom that is found in one of our drugs and in no other, never is a characteristic because it is a *unicum*; every day we may find the very same in another, and on the other hand, it may be a very good genuine symptom and a *unicum*, still very far from being a real characteristic.

There are a great many more such peculiarities of a very different value; further observations only can decide.

Another error was once started, and the attempt was made to adopt one real good and characteristic symptom as the main one of each drug, and dropping all the rest, give that medicine in every case where we meet such a symptom in practice, as a characteristic of a case. It is against the main rule of Hahnemann ever to give, if we can possibly help it, a medicine for a single symptom, but always select a medicine for the totality of symptoms, that is, for the sick, for the individual before us. Such a practice would also lead to a continual change of medicine, and to the breaking of another wise rule of our master: "Let every given medicine have its full time, as long as the case allows it."

We arrive at another error to which characteristics have led some of our practitioners; an error requiring your particular attention. It rests on a very remarkable fact, observed by our school, and we may well say, the greater the truth, the greater the error. Among all corroborations of our *Materia Medica*, the greatest and the most undeniable, is the following:

Having found by our provings, by cures, and by careful observations, a group of characteristics, and knowing the full and complete character of the drug, we sometimes meet with cases, where, after we find one or a few such characteristics, we find also the others, even all of them; all characteristic symptoms of the case are to be found in the very same drug together. For instance we find some symptoms of a woman in *Calcarea*, and afterwards all other similar;

the same with a child. The best illustration is a case communicated once by Bœnninghausen.

PULSATILLA CHARACTERISTICS.

"About three years ago, while traveling," says Bœnninghausen, "in 1835, I arrived one evening at a hotel, where, as it happened to be Sunday, I found several friends of the proprietor assembled, and also the family physician, quite a young man. I had but just entered the parlor when the eldest daughter stepped up to me and asked me to cure her toothache, which she said, since a fortnight, came on *every evening after sunset and lasted till midnight*. Many things had been tried but all in vain, which was also affirmed by the young physician who stood near us, and the only possible *relief she obtained was by going out of doors or leaning out of the open window*. It was hardly the place to question her in regard to other symptoms, particularly of a more private nature, so with the conviction that if it did not help her, it would certainly do her no harm, I took from my pocket case a bottle of the decillionth potency of Pulsatilla and asked the young lady to smell of it once. The success exceeded my most sanguine expectations, for while closing my case and putting it back into my pocket, to the great amazement of all the guests she cried out my toothache is gone, I do not feel any more pain.

The young physician, who was fresh from the University, was very much astonished and said if the cure were lasting it was indeed wonderful.

I now began to draw my conclusions backwards, *because Pulsatilla* had helped her so quickly the characteristics of the remedy *must* also be found among her symptoms. So I answered that if the patient would obey homœopathic rules regarding diet eight or ten days, the toothache would not only stay away, but she would also be freed from her other complaints. This puzzled the youthful disciple of *Æsculapius* still more, and he asked what other complaints? I began to enumerate some of the characteristics of this remedy: *Predominant chilliness; want of thirst; lachrymose disposition; the warmth of the stove is unbearable; sleeplessness before midnight, and stupifying unrefreshing sleep towards morning; disgust for fatty dishes etc.* He declared that I must have ascertained all these symptoms from the young lady herself, and when the others said that I had but just arrived, and not spoken a word with her but what he had heard, he replied rather crossly that they only said so to please me, and that it was not possible for me to know these things otherwise. I then proposed to him that I would tell him something secretly, and he should then go to the lady and ascertain whether I was right, and as he assented to this I took him aside and told him that the patient *suffered from diarrhœa which was mostly slimy, and that menstruation appeared too late, about every five weeks, lasted only a few days, and that she suffered during that time with pain in the small of her back, and cramp-like pain in the abdomen.*

To test the truth to his own satisfaction, he told her that I had said she suffered from constipation, and her menstruation came

too soon, and was too copious, whereupon she answered that in this respect I had made a great mistake, for exactly the opposite were the case, and on questioning her more closely he found every thing that I had told him corroborated, which he afterwards told me himself with most praiseworthy candor.

A few months later, when I saw the girl again, she was fresh and blooming, and thanked me warmly for the good I had done her, as my prophesy in regard to her complaints had proved true, and she was now entirely well.

Whether the young Doctor ever investigated Homœopathy I do not know, but I hardly think so, for I never heard of it."

Such cases we meet with in life, but it would be a very deceiving rule to expect it always to be so.

The first symptoms in this case could have been connected with others, with entirely different symptoms, not indicating Pulsatilla, but Sepia. B. saw the girl before him, her face, her whole appearance may have reminded him of Pulsatilla. Her features may have been such as reminded him of other cases cured by the same medicine. B. further was careful enough and said, "As it helped her so quickly, I concluded that the girl would have the other characteristics of Puls." There is a very great and an essential difference between a conclusion, *a priori* or *a posteriori*.

If we find in a case one characteristic symptom which indicates a certain well known drug, our attention may be called to it and we may expect to find some of the others, but we ought to find all the others corresponding, before giving it, and then we may expect a cure. Of course we ought not to suggest them in the examination of the sick. We ought always to get the symptoms *out of the sick*, not examine them *into the sick*. This is the main rule of a true Hahnemannian examination.

To decide to give a medicine according to one symptom, no matter how characteristic it may be, is to repeat the same fault that others may have fallen into, prescribing for names when they decide to give Belladonna because the child has the scarlet fever. We may succeed, by good luck, by chance only. All such cures are on the one side as on the other, accidental ones. We will have ample occasions in the course of the lectures to explain this more fully; to elucidate it, and prove it.

Characteristics ought always to be used in combination, not singly.

These combinations even, if they appear to differ endlessly, like the position of the pieces on the chessboard, are limited by laws; not every variation that can be made; not every combination that is possible, is to be found in nature. Aided by physiology and pathology, we may find these laws; in the course of the lectures this will be spoken of. On the other side, you will learn how far each combination of characteristics indicates the respective drug. As often as we meet with them in the sick, they indicate the drug, independent of the pathology of the case. Ample illustration will be given of this very important fact. It is the method of the Philadelphia School to study *Materia Medica* by characteristics. All who belong to the Philadel-

phia School have to learn how to heal the sick by mastering the characteristics.

The lectures on *Materia Medica* will thus principally give you the main characteristics, at least of all of our well known drugs, and in such an order that you will be able to comprehend them, digest them, as it were, and if you are willing, earnest, and do your share, and store them up by daily, weekly, monthly repetitions, you will have them on hand, and they will be ready for use all your lifetime.

We will not forget the general principles or lose sight of them. One hour of the four every week we will dwell on generalities, while the other three hours we will take the specialities of one drug after the other, and one family after the other, the most important first, adding from time to time by comparisons. One hour we must have to bestow on the higher principles of our healing art.

If you know nothing but generalities you are altogether dependent on good luck to meet such cases as your characteristics will be fit for. Then you would be like a man in a large hotel, having a great many rooms, with a large bundle of keys in his hand. Such a man has continually to try and find the right one. He may find it or not, just as it happens. The master-key will open all doors. General principles are master-keys.

Regarding the characteristics, in order to save time, you ought to get what was printed a year ago, for the use of our Philadelphia School, in the form of cards, according to Dr. Tucker's method, and introduced by us. You ought to have them, either printed or copy them. They have been selected with great care and will form the basis of the lectures. You ought to commit them to memory according to Dr. Tucker's method, if possible, before the lecture on each such drug.

Supposing every one of you to know them by heart, we may refer to them again and again, but lose no time by dictating any of them. All others to be added will be dictated.

All those that may have been printed in the journal of our school will be referred to, but not dictated. In this way we save time and you may be able to carry with you at the end of the lectures, all that is most valuable in our *Materia Medica*. At the time of your examination you will find the very same little cards spread out on the table. Then you will have a chance to show how many you know.

CONCLUSION.

While all your instruction in the Philadelphia School is based on characteristics, you should be warned in the first lecture against all errors in regard to them, which, when practising, you might fall into. There is one more to be spoken of. Suppose you had a case where not only the symptoms were changing all the time, but even the most characteristic symptoms. One day you find the one, another day another medicine, as it seems, clearly indicated by them. What have you to do? Such hysterical or hypochondriacal cases you will certainly meet with, and it may be that your whole reputation will depend on such a case. What have you to do? *Be very careful in the selection of the medicine, never decide in a hurry, as such cases will give*

you ample time to study them. And after having carefully decided, and found, by similarity, of course, the best opposite, *be firm*, make it a main condition, the patient must not take any other medicine, and stand firm with your well selected one; give, if necessary to repeat, the same higher and higher, but, if possible, do not change, until all has been gained by that drug which can possibly be gained by it. The best remedy there is for changeability is firmness. This may be illustrated by an example taken from life.

Suppose there was a college, a medical college, a homœopathic medical college, which had existed twenty years and had changed professors nearly every year, or if there was no change in men, they changed their chairs, and, what is still worse, changed principles every year, sometimes even in one single summer. Another set of men each winter; another modification of doctrines each course. What would be the remedy for it if it became dangerous to the cause? Something similar, and of course opposite, with the principal character of firmness. A similar but an opposite college, opposite by its firmness; free from all undue influence from without and from within. To prevent this it was better to hire rooms. Have no building except what could be paid for, or built on endowments of cash in hand. No interest on stocks to be paid, but *scholarships*, thereby affording to students who may not have the necessary money, a chance, without begging or marketing. No floating debt or mortgage; but a permanent body of trustees. Not a floating concern, but *above all, a permanent faculty, every member selected with care and elected for a lifetime.*

This will be the remedy and secure permanent progress. But still, objections may be made to this, as well as to our *Materia Medica*. The very word "life-time" reminds every one that this very time is limited. Life is short says Hippocrates. Suppose there was an old man among the permanent faculty, his death would make a change in spite of all the trustees and by-laws. That is true, it may be. But how have we to act as long as we have life; by what must we be ruled in such cases? There is a great difference between *possibility* and *probability*. The possibility of dying is the same to all of us, young and old. The *probability* of it makes the difference. Now let us ask the Insurance Companies about probabilities; they know, because with them large sums of money are at stake. The rule of probability says, that, for instance, if a man has reached the age of 67, he may be expected to live till 76. Of course, according to *possibility*, changes may take place at any time in spite of probability. But the difference is a very great one between changes happening according to a higher law by the divine will, and a change made according to the arbitrary, tyrannical notions of one, two or three wire-pulling men. Suppose the said old man reaches his 76th year, possibly more, what a burden such an old foggy will be, full of notions, and how arbitrary he may be in ten years, nobody knows, he does not know himself. How will you get rid of him? By impeachment? We know that is easier said than done. Well, if any one should be uneasy about that, he will send in his resignation, to

take effect on the 22d of March, 1876, when it will be fifty years since he obtained his degree as M. D.—nine years, they may be willing to bear with him.

But, the age of 76 reminds us of a story, and a very good one.

After Napoleon had disturbed the peace of Europe, and was finally beaten in the battle of Leipzig by the allied powers, and banished by them to the Island of Elba, he returned again with a large army. The allies had once more to march from the North to the South. Blucher was placed at the head as main commander of the Prussian army, and marched from the North towards Belgium. Great objections were raised on account of his age. He is old now and infirm, and full of queer notions, etc. He was attacked near Ligny, before he was ready, and was beaten, his horse fell, he was thrown under it, and was carried away for dead. Of course in a day or two he rallied again, sat on the back of another horse, and was smoking his little pipe lustily.

Napoleon now turned his whole power against Wellington, who stood before Waterloo. The Iron Duke stood it manfully and did not move an inch all day, kept his position firm.

But as the sun turned towards the West and sank deeper and deeper in the horizon, the Duke wrote with a lead pencil the order to his generals to be ready to return during the night and retreat to another position. There was a little cloud seen in the far East on the horizon. The cloud increased. It was an army, coming nearer like a hailstorm, and the cloud opened, and cannon balls came like hail into the right wing of the French army and rolled it up. The battle was won.

Who was the commander of that army? Who rolled up Napoleon's old guards with his young volunteers? It was Blucher, the old man of 76.

By that battle peace was secured for fifty years. Let us trust to the one from whom comes life and progress and peace, and let us never forget our friends, the Life Insurance Companies and their *probabilities*. We hope they will be right, and if they should; present company is invited to come on the 22d of March in 1876, to 114 N. 12th street. Please take a note of that and do not forget it.



NOTICES OF THE "NEW REMEDIES."

The Editors of the North American Journal of Homœopathy say:

"We have copied in full the title-page of this Representative Book by one of the representative men of the new age of medicine. It gives us pleasure to do this because the Book is one of the few which suggests new and hopeful ideas of the future, and of the evident onward march of real science. Of all the branches of human knowledge, therapeutics has progressed most slowly for one-third of the present progressive century. The art of diagnosing disease has improved more rapidly than ever before; the art of curing it has scarcely advanced during the whole of that time. Chapman's "Therapeutics" amused us in our boyhood. Eberle's "Therapeutics" gave us some little hope that the art of curing disease might yet become a respectable vocation; up to that time in our youthful pride and self-respect we did not acknowledge that the title "Doctor of Medicine" was an honor to anybody. Since those days of self-sacrifice and of hoping against hope, where has allopathic medicine furnished a work that has lightened the heavy burden of suffering humanity.

* * * * * It becomes necessary that these multifarious treasures should be stowed away in tangible and usable order; and it is necessary also that this should be done by one who is full of the subject, a devoted student of the American Medical Botany and Materia Medica. Such a man is the Author, Compiler, and Corrector of the work on *New Remedies*.

"The work itself has often received our notice in the first Edition. We now take it as it reaches us as revised, much enlarged, and dedicated 'to the homœopathic physicians of North America and England.' The preface to the first edition gives good reasons for an effort to collect and concentrate the more recent provings of indigenous remedies. * * * * * Without claiming that the work is 'complete' in its present form, the author says he 'will be satisfied if it is only pronounced by the profession eminently suggestive.' The moderate verdict thus asked for will certainly be awarded in the high court of medical science for both hemispheres. * * * *

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